

## DECLARATION, POWER OF ATTORNEY AND POWER TO INSPECT

As a below named inventor, I hereby declare:

that my residence, post office address and citizenship are as stated below next to my name;

that I verily believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural inventors are named below) of the invention entitled: "**POWER CONTROL ARRANGEMENT, AS FOR A FLASHLIGHT**"

the specification of which [check one(s) applicable]

       was filed \_\_\_\_\_ as PCT International/U.S. Application No. \_\_\_\_\_

       and was amended by Amendment filed \_\_\_\_\_ (if applicable); [or];

X is attached to this Declaration, Power of Attorney and Power to Inspect;

that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above; and

that I acknowledge my duty to disclose information which is material to the patentability of this application in accordance with Rule 56(a) [37CFR§1.56(a)].

**POWER OF ATTORNEY:** As inventor, I hereby appoint the practitioners associated with **Customer No. 000110** as my attorneys or agents with full power of substitution to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith: **Clement A. Berard, Reg. No. 29,613, Roger W. Herrell, Reg. No. 22, 964, Stephen H. Eland, Reg. No. 41, 010, John B. Berryhill, Ph.D., Reg. No. 36,452 and Henry H. Skillman, Reg. No. 17,352.**

**POWER TO INSPECT:** I hereby give **DANN, DORFMAN, HERRELL AND SKILLMAN, P.C.** of Philadelphia, PA or its duly accredited representatives power to inspect and obtain copies of the papers on file relating to this application.

**SEND CORRESPONDENCE TO: CUSTOMER NUMBER 000110**

**DIRECT INQUIRIES TO: CLEMENT A. BERARD, PTO Regis. 29,613**

Telephone: (215) 563-4100

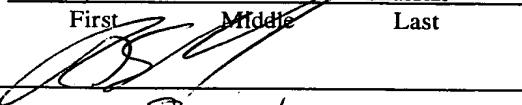
Facsimile: (215) 563-4044

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

### SOLE OR FIRST JOINT INVENTOR

### SECOND JOINT INVENTOR (if any)

Full Name Raymond L. Sharrah  
First        Middle        Last       

Signature   
Date 2-3-04

Residence Collegeville Pennsylvania  
City \_\_\_\_\_ State or Country \_\_\_\_\_

Citizenship UNITED STATES OF AMERICA

Post Office Address:

258 Zvarick Road

Collegeville Pennsylvania 19426  
City \_\_\_\_\_ State or Country \_\_\_\_\_ Zip Code \_\_\_\_\_

Full Name Norman A. Messinger  
First        Middle        Last       

Signature   
Date 03 FEB 2004

Residence Center Square Pennsylvania  
City \_\_\_\_\_ State or Country \_\_\_\_\_

Citizenship UNITED STATES OF AMERICA

Post Office Address:

1669 Miller Circle

Center Square Pennsylvania 19422  
City \_\_\_\_\_ State or Country \_\_\_\_\_ Zip Code \_\_\_\_\_